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ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD

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INVESTIGATIVE COMMITTEE REPORT

TO: Arizona State Veterinary Medical Examining Board

FROM: AM Investigative Committee: Robert Kritsberg, DVM - Chair
Christina Tran, DVM
Carolyn Ratajack
Jarrod Butler, DVM
Steven Seiler

STAFF PRESENT: Tracy A. Riendeau, CVT - Investigations
Marc Harris, Assistant Attorney General

RE: Case: 21-34
Complainant(s): Wendy B. Lea
Respondent(s): Christopher Monarski, D.V.M. (License: 4164)

SUMMARY:
Complaint Received at Board Office: 9/23/20
Committee Discussion: 4/6/21
Board IIR: 5/19/2021

APPLICABLE STATUTES AND RULES:
Laws as Amended August 2018 (Lime Green); Rules as Revised September 2013 (Yellow).

On August 20, 2020, "L[redacted]" a 6-year-old male domestic short hair cat was presented to VCA Animal Referral and Emergency Center of Arizona for vomiting, lethargy and hiding. Blood work and radiographs were performed and revealed possible hepatobiliary disease. Hospitalization with IV fluids was recommended, as well as an abdominal ultrasound. Complainant declined.

Complainant was then offered SQ fluids, cerenia and gabapentin, with a recommendation to follow-up with the primary care veterinarian the following day. Complainant only wanted the gabapentin and the cat the discharged.

Approximately six days later, the cat passed away. Complainant was concerned that gabapentin was dispensed to a cat with liver issues; her research indicated that it was contraindicated. Complainant had not followed up with her primary care veterinarian as directed.

Respondent is the responsible veterinarian for the premises.

Complainant was noticed and appeared telephonically.
Respondent was noticed and appeared telephonically.

The Committee reviewed medical records, testimony, and other documentation as described below:

- Complainant(s) narrative: *Wendy B. Lea*
- Respondent(s) narrative/medical record: *Christopher Monarski, DVM*
- Consulting veterinarian(s) narrative/medical record: *Andrew Lenius, DVM; Heather Gerrish, DVM*

PROPOSED 'FINDINGS of FACT':

1. According to Complainant, the cat vomited multiple times the day before presentation and the day of presentation to VCA Animal Referral and Emergency Center of Arizona (VCA ARECA).

2. On August 20, 2020, the cat was presented to Dr. Gerrish at VCA ARECA. The concerns reported initially by Complainant were that the cat was unresponsive; lethargic at home but was still eating and drinking. No coughing, sneezing, vomiting or diarrhea noticed. Dr. Gerrish examined the cat and found a weight = 10.9 kg, a temperature = 102.8 degrees, a heart rate = 145bpm and a respiration rate = 24rpm; BCS = 8/9. The cat was approximately 5% dehydrated and cried out in pain upon abdominal palpation – no obvious masses or organomegaly was appreciated. There was flea dirt in the hair coat as well as urine staining/debris on the prepuce.

3. Dr. Gerrish stated in her narrative that after further discussion with Complainant, the cat had a history of intermittent vomiting. Afterwards, an AFAST was performed and there was no evidence of urethral obstruction. Given the nonspecific presenting complaint and abdominal pain, Dr. Gerrish discussed pursuing GI diagnostics with Complainant. Complainant advised that the cat was kept in a separate room of the house, so he was not monitored closely but Complainant did feed the cat and clean his litter box daily. They discussed primary GI vs systemic vs urinary causes of vomiting and abdominal pain.

4. Complainant approved the estimate for bloodwork and radiographs. Complainant did not want the urinalysis as she did not feel the cat was having urinary issues at that time. Abdominal radiographs were unremarkable and the abnormal blood results were as follows:

ALT	*139*	*20 – 100*
WBC	*21.30*	*5.50 – 19.50*
MON	*2.07*	*0.00 – 1.50*
PLT	*129*	*300 – 800*

5. Dr. Gerrish discussed her findings with Complainant; no abnormalities noted in the radiographs and blood work showed mild elevation of one of the cat's liver values. Dr. Gerrish explained that any elevation in liver enzymes was a cause for further investigation in cats. She recommended a follow up for abdominal ultrasound the next day for further information and possible internal medicine consult depending on the results. Overnight hospitalization with ultrasound and possible transfer to internal medicine versus taking the cat home and returning for ultrasound was offered to Complainant. Complainant expressed financial constraints therefore Dr. Gerrish recommended, at a minimum, close monitoring of the cat and following up with Complainant's primary care veterinarian that week for further care.

6. Dr. Gerrish discussed that given the cat's obesity, hepatic lipidosis was a possible risk to the cat if he was persistently anorectic – she was concerned with the cat having potential hepatobiliary disease. Complainant further declined SQ fluids and cerenia, and elected to just take gabapentin home. The cat was discharged with gabapentin 50mg/mL, give 1.4mLs by mouth every 8 hours as needed for pain.

7. Discharge instructions were given to Complainant that included recommendations to follow up for further diagnostics and care as soon as possible.

8. On August 22, 2020, Dr. Gerrish called Complainant to give her the results of the radiograph report from the radiologist and check on the cat. Complainant did not answer therefore Dr. Gerrish left a voicemail with Complainant.

9. On August 31, 2020, Dr. Gerrish received a call from Complainant that the cat had passed away and she did not feel the cat received adequate care. Complainant was concerned that the cat had an undiagnosed GI obstruction and that was the cause of death. Dr. Gerrish explained that there was no indication of GI obstructions and reminded Complainant of her recommendations at that time and the concern of an undiagnosed, untreated, liver disease.

10. On September 11, 2020, Complainant spoke with Respondent, the responsible veterinarian for the premises. Complainant requested a refund as she felt the gabapentin that was dispensed to her cat that had liver disease, was contraindicated, based on information she read on the internet. Respondent was unable to substantiate Complainant's claim, thus concluded that Dr. Gerrish, under the guidance of associate veterinarian, Dr. Lenius, practiced in good faith and with the cat's best interest in mind.

COMMITTEE DISCUSSION:

The Committee discussed that Dr. Monarski was not involved in the case. Based on case file materials and testimony, the Committee did not see a violation of the Veterinary Practice Act.

COMMITTEE'S PROPOSED CONCLUSIONS of LAW:

The Committee concluded that no violations of the Veterinary Practice Act occurred.

COMMITTEE'S RECOMMENDED DISPOSITION:

Motion: It was moved and seconded the Board:

Dismiss this issue with no violation.

Vote: The motion was approved with a vote of 5 to 0.

The information contained in this report was obtained from the case file, which includes the complaint, the respondent's response, any consulting veterinarian or witness input, and any other sources used to gather information for the investigation.

TR

Tracy A. Riendeau, CVT
Investigative Division

ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD
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COMPLAINT INVESTIGATION FORM

If there is an issue with more than one veterinarian please file a separate Complaint Investigation Form for each veterinarian

PLEASE PRINT OR TYPE

FOR OFFICE USE ONLY

Date Received: SEPT. 23, 2020 Case Number: 21-34

A. THIS COMPLAINT IS FILED AGAINST THE FOLLOWING:

Name of Veterinarian/CVT: Christopher Monarski, DMV

Premise Name: VCA Animal Referral and Emergency Center of Arizona

Premise Address: 1648 North Country Club Drive

City: Mesa State: Az Zip Code: 85201

Telephone: (480) 898-0001

B. INFORMATION REGARDING THE INDIVIDUAL FILING COMPLAINT*:

Name: Wendy B Lea

Address: [redacted]

City: [redacted] State: [redacted] Zip Code: [redacted]

Home Telephone: [redacted] Cell Telephone: [redacted]

**STATE LAW REQUIRES WE HAVE TO DISCLOSE YOUR NAME UNLESS WE CAN SHOW THAT DISCLOSURE WILL RESULT IN SUBSTANTIAL HARM TO YOU, SOMEONE ELSE OR THE PUBLIC PER A.R.S. § 41-1010. IF YOU HAVE REASON TO BELIEVE THAT SUBSTANTIAL HARM WILL RESULT IN DISCLOSURE OF YOUR NAME PLEASE PROVIDE COPIES OF RESTRAINING ORDERS OR OTHER DOCUMENTATION.*

C. **PATIENT INFORMATION (1):**

Name: L[redacted] - cat

Breed/Species: Mixed

Age: 6 years Sex: Altered Male Color: White - Black Spots

PATIENT INFORMATION (2):

Name: _____

Breed/Species: _____

Age: _____ Sex: _____ Color: _____

D. **VETERINARIANS WHO HAVE PROVIDED CARE TO THIS PET FOR THIS ISSUE:**
Please provide the name, address and phone number for each veterinarian.

Heather S Gerrish, DVM - VCA 1648 N Country Club, Mesa Az 480-898-0001
Andy Lenius, DVM - VCA 1648 N Country Club, Mesa Az 480-898-0001
Christopher Monarski, DVM - 1648 N Country Club, Mesa Az 480-898-0001

E. **WITNESS INFORMATION:**
Please provide the name, address and phone number of each witness that has direct knowledge regarding this case.

W[redacted] B [redacted]
T[redacted]

Attestation of Person Requesting Investigation

By signing this form, I declare that the information contained herein is true and accurate to the best of my knowledge. Further, I authorize the release of any and all medical records or information necessary to complete the investigation of this case.

Signature: Wendy B. Lea

Date: 9/20/20

F. ALLEGATIONS and/or CONCERNS:

Please provide all information that you feel is relevant to the complaint. This portion must be either typewritten or clearly printed in ink.

I took my dear L[redacted] to VCA Animal Referral and Emergemcy of Arizona, 1648 North Country Club, Mesa, Az 85201, at approximately 6:30 pm 8/20/20. He had vomited several times 8/19/20 but on 8/20/20 his vomiting had increased to around 12 times. He was young and strong and had not been sick before.

I called for an appointment and upon arrival handed L[redacted]over to VCA personnel and waited in my vehicle (requirered due to covid) for over three hours, they were very busy.

When L[redacted] was returned to me I received the bill and promptly paid $746.55, which was the charge for:

Emergency Exam	$112.10
Abdominal Xray Study	$278.55
AIS Radiology Interpretaion	$102.75
VetScan Comprehensive Diagnostic Profile & CBC	$253.13
Estimate (Considered Low Balance) Due:	$746.55

I was directed to give L[redacted] - GABAPENTIN 1.4 mL by mouth every 8-12 hours as needed for pain and indicated that test results showed obvious liver disease/concerns. FATTY LIVER was mentioned in addition to potential for HEPATOBILIARY DISEASE. Which was Indicated in the e-mail report.

The full report was e-mailed to me and futher revealed the following Diagnostics:

- Bloodwork: White blood cell changes consistent with stress and elevation in one of the liver enzymes (ALT)

- Abdominal Radiologtaphs: Stool in colon; remainder of abdomen within normal limits.

I did notice that nothing had been mentioned verbally or in writing regarding his vomiting events.

I took L[redacted] home and administerd the GABAPENTIN as directed and found L[redacted] to be feeling somewhat better the next day. I additionally revised his diet and gently helped him with more exercise.

F. **ALLEGATIONS and/or CONCERNS:**

Please provide all information that you feel is relevant to the complaint. This portion must be either typewritten or clearly printed in ink.

I administered GABAPENTIN only four times in five days with the hope of keeping him comfortable (far less than had been prescribed). However, after the last dose, Monday evening, within minutes he screamed in great agony. His legs went straight and stiff and was in obviously great pain. I sadly watched him as he appeared to me to be dying. It was such a horriffic experience to see him in such incredible distress. After several minutes he became more relaxed but did not move much, As I waited with him, he very gradually tried to move but was unable to get up or walk. He appeared very dazed and uncoordinated and after many minutes he tried to pull himself to his nearby water bowl. I sat with him for about thirty more minutes in which time he seemed to be coming out of this frightening, agonizing event.

Thinking he would be better with an evening of rest, I went to sleep. He was dead the next morning!!!!

L[redacted] was young and strong and died way too soon and very unexpectedly. I grieviously discussed my great loss with Christopher Monarski, DVM with VCA (Mesa) and I expressed my extreme concern regarding their use of GABAPENTIN on a cat with LIVER DISEASE. He simply told me that everything they did when prescribing GABAPENTIN was acurate and safe. I told him my research on the Internet srongly stated that GABAPENTIN was CONTRAINDICATED for cats with LIVER DISEASE and "COULD BE FATAL"!!!

I further told Christopher Monarski, DVM that I requested a full refund for grievious/reckless/uniformed use of a very dangerous drug. Not because of a mistake but due to gross negligence.

As you know so well, our pets are family members and must be cared for in like manner.

I can not bring L[redacted] back but to pay the bill for his demise hurts my heart as much as his death.

I would greatly appreciate your investigation into this sad and preventable loss. Hopefully you may prevent the careless use of dangerous drugs so other cats will not have to die this way.

Thank you for your time and attention to this tragic event.

VCA Animal Referral & Emergency Center of Arizona

10-12-20

Arizona State Veterinary Medical Examining Board
1740 W Adams St, Suite 4600
Phoenix AZ 85007

21-34, In Re: Christopher Monarski, DVM

To whom it may concern,

First, I feel very bad for Mrs. Lea, L[redacted] and the horrible experience they must have gone through. I have had only one interaction with Mrs. Lea. This occurred on September 11, 2020 in which I contacted her via phone to discuss her concerns and questions regarding L[redacted] (case # 115095). She described in detail the situation as expressed in her complaint and stated that Gabapentin was a very powerful drug and should never be used in a case of liver disease. She said she had done extensive research on the internet that has led her to this conclusion. I asked her to share her search criteria and or provide me with this information so that I may review it. She declined and recommended I do my own research in which I was unable to substantiate her claim. She was very adamant about getting a 100% refund of her payments and an admittance of negligence on our part for providing her cat with a powerful drug that must have caused his demise.

In review of the case, I see a full examination, recommendations for further work up, follow up calls and recommendations for alternative care. The medication Gabapentin was prescribed to L[redacted] at an appropriate dose and frequency. Dr. Gerrish under the guidance of Dr. Lenius practiced in good faith with L[redacted] best interest in mind. It is unfortunate we were unable to fully evaluate L[redacted] condition and come up with a clear treatment plan, prognosis, and risks.

Please let me know if I can be of more assistance regarding this matter. I am available by phone and/or email.

Respectfully,

Christopher J. Monarski, DVM, DACVS (SA)

Medical Director, VCA Animal Referral and Emergency Center or Arizona
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